



Nurse Family Partnership

Presently Nurse Family Partnership has 113 nurse home visitors with client caseload capacity of 2452, which is 15% of eligible first-time mothers and families. The NFP Advisory Council, in response to 2008 Louisiana Senate Concurrent Resolution 70 recommended expansion of NFP to service 50% of the eligible clients. Increasing capacity to 50% was recommended by the Council through a phased-in-expansion over the next five years. This expansion will require \$2,550,000 in FY 2011 to add 40 new home visiting nurses and cover all related expenses for a 6-month time period. The first 6 months are needed to establish contracts and hiring. This will service 1000 more eligible clients, increasing services to 21% of the eligible population.

Objectives

Expand Nurse-Family Partnership home visiting program for first time, low-income mothers from current 15% capacity to 21% capacity in FY 2011.

Performance Information for NFP Participants and NFP program

- Percentage reduction in smoking during pregnancy
- Percentage reduction in experience of violence during pregnancy
- Percentage of fully immunized 24 month old toddlers
- Percentage increase in workforce participation for 18 year olds and above from program intake to completion
- Number of completed home visits, with nurses hired 1/1/2011: 2040 additional visits in FY 2011

Narrative In 1999, Louisiana's Maternal and Child Health-Title V Program, Office of Public Health (OPH) initiated the Nurse Family Partnership Program to address the root causes of the poor health of Louisiana's pregnant women and infants and to comply with Title V of the Social Security Act Section 501 [42 U.S.C. 701] "develop ... expand maternal and infant home visiting program in which case management services ... health education services, and related social support services are provided in the home." OPH chose this evidence-based, cost effective program to provide home visiting to first time, low income mothers & their families. The mother is partnered with a registered nurse early in her pregnancy & receives ongoing home

visits until her child's second birthday. NFP's three major goals are to improve pregnancy outcomes by helping women engage in good preventive health practices; improve child health & development by helping parents provide responsible, competent care; & improve economic self-sufficiency of the families by helping parents continue their education & find work. The first pregnancy is the optimal time to promote & teach positive health & development behaviors between a mother & her baby. NFP nurses are perceived as trusted & competent professionals, fostering a powerful bond between nurse & mother. In addition, NFP is of sufficient duration & intensity to promote behavior change that research shows to be enduring. The average home visit is 1-1 ½ hours in length. Clients voluntarily participate in approximately 60 home visits over the course of the 2 ½ year intervention. Over the last 10 years, OPH NFP in Louisiana has successfully partnered with varied contract agencies to provide NFP in 52 parishes. Provider agencies include LSUHSC in New Orleans, Shreveport, Monroe & Alexandria; Lake Charles Memorial Hospital in Lake Charles; Jefferson Parish Human Service District; Capital Area Human Service District; St. Tammany Parish Hospital; Nicholls State University.

Better Health

NFP assures mothers receive prenatal care, improve diet, and reduce use of cigarettes, alcohol and illegal substances. Nurses support mothers to breastfeed & conduct depression screening & follow-up. Parent education focuses on child development, behavior & immunizations. OPH has successfully obtained and leveraged public & private funding, growing the budget from \$1 million to \$12.3 million over the past 10 years. Sixty percent of the funding comes from OPH's Maternal and Child Health Block Grant & its required state match. Other funding sources include Temporary Assistance for Needy Families, Medicaid & United Way of Greater New Orleans. Past funding sources have included Rapides Foundation, Institute of Mental Hygiene, Baptist Community Ministries, and Beauregard Parish.

Safe and thriving children and families

NFP focuses on a vulnerable population that may have limited access to good parenting role models. NFP helps break the cycle of poverty and violence. Nurses support mothers to become knowledgeable parents who are able to prepare their children for successful futures. NFP nurses provide counseling to mothers and families to help them to complete their education and find satisfactory employment. Mothers are educated about the social-emotional and cognitive development of their children. A 48% reduction of child abuse/neglect is one of the proven outcomes of NFP.

Youth education

NFP assists mothers to become more self-sufficient by staying in school, finding employment. NFP research has shown an 83% increase in labor force participation by child's 4th birthday and 31% fewer closely-spaced (<6 months) subsequent pregnancies.

Safety

NFP encourages mothers to use coping strategies and non-violent techniques in interactions with family members & children. Data from 15 year follow-up NFP randomized control study demonstrated a 59% reduction in arrests of children and of the mothers.

The origins of the Nurse-Family Partnership model began over 30 years ago when Dr. David Olds began the first of 3 randomized, controlled trials. A recent report from the Center on the Developing Child at Harvard shows the extent to which early childhood experiences influence later learning, behavior and health. During the first 30 months of a child's life, basic brain functions related to vision, hearing & language develop. It is during this window of opportunity that experienced registered nurses can have a huge impact on the future of both mother and child. Independent research proves the benefits from this intervention. A 2005 RAND Corporation analysis showed that NFP yielded a \$5.70 return for every dollar invested. This analysis also found that for the higher risk families, the community recovered the costs for the program by the time the child reached age 4, with additional savings accruing throughout the lives of both the mother and the child. Data from the 15-year follow up study to the first NFP randomized controlled trial, shows positive effects for nurse-visited families more than 12 years after the visits ended. In addition to the results indicated above, the following outcomes have been observed among program participants:

- 35% fewer hypertensive disorders of pregnancy
- 50% reduction in language delays at child age 21 months
- 56% reduction in emergency room visits for accidents, poisonings
- 67% reduction in behavioral and intellectual problems among children

NFP has been operating in Louisiana since 1999; now the program has a presence in 52 parishes, having served 6,657 women and 4,571 children. Recent Louisiana evaluation results indicate that NFP has statistically reduced cigarette smoking in pregnancy by 18%, reduced marijuana use during pregnancy by 48%, reduced incidence of violence during pregnancy by 23%, achieved better child language development than the national NFP objective when child is 21 months, achieved immunization rates of 94% for 2 year olds, and improved workforce participation for mothers over age 18 years at intake from 42.5% to 61% at program completion.

References:

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